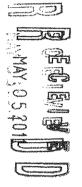
(Family 2051)

SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Zoning Department P.O. Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



INSTRUCTIONS: No permits will be issued until all fees are paid! " White will be issued until all fees are paid!" White

	Amount Paid: \$2,307.00 K	Zoning District	Date	Application No.		
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Mitigation Plan Required: Yes □ No 対
representations. By M. Furtal Date of Inspection 5-3-11
Inspection Record: Wall staked, Meets all stouchs. Troperty aires per apports
Date 37/-1/ Permit Number 11-0109 Permit Denied (Date)
Permit Issued: State Sanitary Number 10-45 Date 6-2-10
(If you recently Attach a Cop
Address to send permit Mike Van Gilder Cooper Engineering ATTACH PO Box 230 Rice Lake, WI 54868 Copy of Tax Statement or
o issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) onsent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. Owner or Authorized Agent (Signature) Date Date
FAILURE TO OBTAIN A PERMIT of STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether
☐ External Improvements to Accessory Building (explain)
☐ Residential Accessory Building (explain) ☐ External Improvements to Principal Building (explain)
☐ Residential Addition / Alteration (explain) ☐ Special/Conditional Use (explain)
Residence sq. ft Garage sq. ft Commercial Other (explain)
nce w/attached garage (# of bedrooms)
Residence sq. ft. 3,847 Porch sq. ft #1 692:18x7:18 Commercial Principal Building Addition (explain) Deck sq. ft. — Deck(2) sq. ft #13 +5/644 Deck sq. ft. — Deck(2) sq. ft #13 +5/644 Deck sq. ft. — Deck(2) sq. ft #13 +5/644 Deck sq. ft. — Deck(2) sq. ft #13 +5/644 Deck sq. ft. — Deck(2) sq. ft #13 +5/644 Deck sq. ft. — Deck
or Principal Structure (# of bedrooms) ☐ Mobile Home (manufactured date)
Type of Septic/Sanitary System Conventional Suptic (with
ucture in a Shoreland Zone? Yes 🗹 No 🗍 If yes. Distance from Shoreline: greater than 75' [
elephone (Horne) (Work) Written Authorization Attached: Yes M No
Cable, WI 54821 Authorized Agent Dennis De
75 South Lake Owen Dr. Plumber Rasmussen
61 _ Page 77-10 _of Deeds Parcel I.D04-018-2-44-01-23-2-03
Lot Block Subdivision V.D.T. 108.1# 1747 Acreage 83.
1/4 of Section 14 Township
AND USE ANTIARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER
OO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Thanges in plans must be approved by the Zoning Department.

Inspector

Date of Approval